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ABSTRACT

This resource packet provides an overview of the wide variety of approaches used by educators, government officials, minority organizations, and foundations to reduce teenage pregnancy or to help teenagers who are pregnant or are parents stay in school. The first section lists, describes and gives the addresses and possible contact person of national organizations providing advocacy, publicity, and materials on teenage pregnancy. The second section (arranged by state) describes statewide initiatives and programs in New England and New York, outlining legislative proposals, policy recommendations, educational opportunities and other services resulting from these initiatives. The third section describes local programming on teenage pregnancy and parenting in the areas of prevention of teenage pregnancy and services whose goals may be educational or health related. The final section is a three-page bibliography on these topics: research/statistics on teenage pregnancy; resources on services for teenagers who are parents or pregnant; and curriculum and other materials for teenagers. (ABL)

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PREGNANT AND PARENTING TEENS: KEEPING THEM IN SCHOOL

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PREGNANT AND PARENTING TEENS: KEEPING THEM IN SCHOOL

OVERVIEW

As a result of the reform initiatives and increased discussion of education in the last few years, educators have begun to take a new look at the problem of students who drop out or are at risk of dropping our of school. Within this large group of students are many females who drop out of school because they are pregnant and young men and women who are parents.

While the rate of teen pregnancy has leveled off in recent years, its magnitude in terms of education is major. In 1984 11% of female adolescents under 20 became pregnant. Forty-seven per cent of these delivered babies. Teenage families with children are most likely to be disproportionately fatherless and poor. Education, employment, and income of both female and male unmarried teens are adversely affected by untimely parenting.

While Title IX of the 1972 Education Amendments mandates equal treatment of pregnant and parenting females, girls experience a number of barriers to continued education that often lead to their dropping out. Educational achievement and pregnancy are related. Girls who are low achievers and poorly motivated in school are also those who tend to become pregnant and drop out of school. Eight out of ten women who are mothers at seventeen or younger never finish high school.

The ramifications of such untimely parenting ripple out across society. Teen pregnancy contributes to the high national infant mortality rate, to the large number of abortions performed in United States, and to welfare dependency. Twenty-five per cent of all teen mothers are receiving welfare payments. Children of teens who have babies are likely to be low birth weight babies who are sick and have more learning problems.

Because of the increased concern about teen pregnancy, educators, government officials, minority organizations, and foundations have all begun to take steps to reduce teen pregnancy. Programs aimed at reduction of teen pregnancy may be characterized as either:

1. <u>Programs aimed at prevention of pregnancy</u>

    - Curricula on sex education and life options
    - Publicity programs using various media to increase public awareness of the problem and to discourage teen pregnancy
    - School-based health clinics
    - Theater and panel presentations by teens for teens

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2. Services to help adolescents who are pregnant or parents stay in school:

   - Coalitions led by city and state governments whose goal is to coordinate and improve the wide ranges of services for pregnant and parenting teens
   - Inschool and out-of-school educational and service programs that may include child care, health services, and special curricula on parenting
   - Teen father programs
   - Health services for pregnant and parenting adolescents.

To provide an overview of this wide variety of approaches, the following are described in this resource packet:

A. National organizations providing advocacy, publicity, and materials

B. Statewide initiatives and programs in New England and New York

C. Local programming in teen pregnancy/parenting in the Northeast and nationally

D. Bibliography.

A. NATIONAL ORGANIZATIONS PROVIDING ADVOCACY, PUBLICITY, MATERIALS

PLANNED PARENTHOOD FEDERATION OF AMERICA, INC. Education Department, 810 7th Avenue, New York, NY 10019.

National organization sponsors an information network that publishes and disseminates bibliographies and other publications. The organization has just begun a national advertising campaign to discourage teen sexuality and encourage the use of birth control.

CHILDREN'S DEFENSE FUND. 122 C Street NW, Washington, DC 20001. Contact: Karen Pittman.

Reducing teen pregnancy is one of its major goals. Its program includes literature, a media campaign, a major national conference, and Adolescent Pregnancy Child Watch. In our region, local representatives are found in New York and Rhode Island.

CENTER FOR POPULATION OPTIONS. 1012 14th Street NW, Suite 1200, Washington, DC 20005.

While it publishes two general newsletters and a number of fact sheets on teen pregnancy, its major work and publications are on school-based health clinics and life options curricula.

GIRLS CLUBS OF AMERICA. 205 Lexington Avenue, New York, NY 10016. Contact: Jane Quinn.

Girls Clubs are testing a comprehensive teen pregnancy prevention program with four components: mother-daughter workshops, career aspirations workshops using Choices, a course on postponing sexual involvement, and a clinic bridge program.

ACADEMY FOR EDUCATIONAL DEVELOPMENT. 680 Fifth Avenue, New York, NY 10017. Contact: Michelle Cahill.

AED sponsors the Urban Middle School Adolescent Pregnancy Prevention Program that provides support for nine middle schools across the country to form collaborations with community agencies to develop comprehensive prevention programs. There are two sites in our region, one each in New York and Boston.

COUNCIL OF CHIEF STATE SCHOOL OFFICERS. Resource Center on Educational Equity, Suite 379, 400 North Capitol Street NW, Washington, DC 20001. Contact: Glenda Partee.

The Resource Center on Educational Equity has developed a resource guide for assessment and implementation of the provisions on pregnancy and parents. School staff can use the instruments and other materials to assess and plan their own programs.

B. STATEWIDE INITIATIVES AND PROGRAMS

Several Northeastern states have responded to the problem of pregnant and parenting teens through statewide initiatives aimed at coordinating services already in existence, surveying needs and problems, and developing new programs to meet those needs. The following state initiatives are described in United States Congress House of Representatives Publication Teen Pregnancy: What Is Being Done? A State-by-State Look (Washington, DC: U.S. Printing Office, 1986). In some states initiatives may have expanded since the survey was completed; states not mentioned may have added programs.

Connecticut

In 1984, the General Assembly created a Task Force on Education to Prevent Adolescent Pregnancy. The Task Force report, issued in January 1985, contains the following legislative and policy recommendations:

Legislative proposals:

- -- establish a Teenage Pregnancy Council, comprised of State agency heads, directors of private service agencies and legislators, to coordinate resources;
- -- continue the Task Force as an advisory body to the interagency council;
- -- institute a State Adolescent Pregnancy Prevention Grant to encourage communities to coordinate their services;
- -- mandate K-12 family life education;
- -- require community advisory councils for curriculum development;
- -- require inservice training for family life education teachers and subsidize localities for the cost;
- -- create and fund a position for family life education consultant in each of the six regional educational service centers;
- -- appropriate funds to fill the State Department of Education position of Health Education Consultant;
- -- expand the existing school-based health clinics by providing funding to allow full-time operation;
- -- provide planning and development grants to establish two new school-based health clinics, one urban and one rural;

-- adopt a limited "mature minor" statute that would allow a minor to consent to pregnancy prevention services without parental consent;
-- fund the Department of Income Maintenance's 1985-86 proposal to increase the Medical Assistance protected income level to 133% of the AFDC standard to ensure that families with medical expenses are better off working than on AFDC;
-- sponsor the AFDC and Wagner-Peyser model grant diversion programs for subsidized job training.

Policy Recommendations:

-- institute training in Family Life Education issues as part of all teacher preparation programs in Connecticut colleges and universities;
-- amend the Public Health Code to change the way abortions are reported;
-- begin planning efforts toward the creation and support of programs patterned after the Boston Job Collaborative;
-- track the total annual and per-case health and support costs associated with women who become pregnant or bear a child during their teens.

Maine

Maine began the "Family Services Program" in 1983 to assist AFDC families whose head of household is under age 20. The primary goal of the program is to "strengthen identified high risk families internally, while assisting them in accessing the services necessary to improve their lives and that of their children." The program assists participating families in education, employment, job training, maternal and infant health care, acquisition of life management skills, family counseling, and facilitation in the use of existing services.

Massachusetts

In the spring of 1985, the Statewide Task Force on Pregnant and Parenting Youth in Massachusetts issued the report, "Uncertain Futures: Massachusetts' Teen Parents and Their Children." The Task Force was a special project of the Alliance for Young Families, a non-profit youth advocacy organization, and included representatives of State-level public agencies and private foundations, providers, and technical advisors.

The report presents recommendations in several areas including:

Comprehensive and coordinated services:

-- develop a State Plan as an inter-agency initiative to integrate education and vocational services, day care and basic services for pregnant and parenting teens.

Educational opportunities:

- -- legislate funding for the State's Equal Education Opportunity Act, to monitor and prevent exclusion of pregnant students from public schools and assure equal quality in alternative programs;
- -- increase resources for the development of model school-based young parent programs;
- -- develop and disseminate guidelines for flexible attendance and tardiness codes;
- -- promulgate regulations for existing School Health Education Law;
- -- develop incentives for the creation of collaborative efforts between local schools and human service agencies;
- -- utilize resources for guidance services through the Federal Vocational Education Act;
- -- use VEA funds to ensure elimination of sex bias in vocational education programs;
- -- initiate appropriate legislative or programmatic changes to allow students to have simultaneous access to vocational and academic programs of study;
- -- make basic skills remediation more readily available for young parents in youth employment training programs;
- -- expand outreach effort through the Department of Public Welfare to inform teen parents of opportunities under the Employment and Training program.

Day care as an essential service:

- -- fund Department of Social Services to provide infant/toddler programs and transportation services to teen parents; consider utilizing 15% of Job Training Partnership Act (JTPA) discretionary funding for child care services.

Optimum health and welfare outcomes:

- -- ensure available adequate prenatal and postpartum care to all pregnant and parenting adolescents through Medicaid, private health insurance coverage and increased funding to the Department of Public Health Pregnant Adolescent Program;
- -- establish and disseminate guidelines for comprehensive and interdisciplinary health services to teen parents;
- -- increase AFDC benefit levels to ensure a decent standard of living; and
- -- support public housing policy and practice of maintaining extended family units for teen parents.

New York

In 1984, under the direction of the Governor, New York began a major statewide initiative designed to address the problems of adolescent pregnancy. It contains two major components: The Governor's Task Force on Adolescent Pregnancy, and a funding program, the Adolescent Pregnancy Prevention and Services Program.

The Task Force report, issued in February 1985, underscores the historically piecemeal and uncoordinated approaches, and the failure to focus adequately on preventive strategies. It proposed instead, "a prevention strategy which takes a more fundamental approach to addressing the causes of adolescent pregnancy . . . . Central to the framework developed by the Task Force is an increased emphasis on and refocusing of prevention efforts. Past attempts to prevent adolescent pregnancy have centered on youth already in crisis."

The following recommendations are highlights in the Task Force report:

-- review current policies and practices which have an impact on adolescent pregnancy:
-- further explain the concept of youth and family development and propose an appropriate balance with services for pregnant and parenting adolescents;
-- develop strategy for implementing the comprehensive state policy;
-- involve a broad spectrum of individuals and groups;
-- identify existing programs and approaches which promote youth and family development;
-- strengthen the ability of major institutions and community organizations to promote youth and family development;
-- identify effective models for the delivery of coordinated, comprehensive services for serving pregnant, parenting, and at-risk adolescents;
-- develop recommendations to ensure cost-effective funding of services for pregnant, parenting, and at-risk teens;
-- help to promote the quality and ongoing effectiveness of services;
-- promote the broader involvement of the community, including the media, in primary prevention strategies and activities;
-- increase the knowledge and sensitivity of policymakers, administrators, and the service providers to the needs of youth; and
-- encourage a broader application of youth and family development strategies across youth issues and concerns.

The funding program, the Adolescent Pregnancy Prevention and Services Program (Chapter 974, NYS Laws, 1984) has four principle components: prevention; greater opportunities for self-sufficiency; improved coordination; and broader community involvement. It has received a $5 million appropriation.

Rhode Island

In 1985 the Department of Social and Rehabilitative Services began a $280,000 grant program, the Adolescent Pregnancy-Parenting Program, to provide comprehensive services to pregnant and parenting teenagers through a "case managed service delivery system." In this program, the Department purchases services from seven community providers, and the services are offered in a variety of settings, including two in-school settings.

Services provided under this program include health care, education, social services, housing services, and training and employment. The Rhode Island Directorate of Children, composed of the five major State departments with a mandate to serve children (Health, Education, Children and Their Families; Mental Health, Retardation and Hospitals; and, Social and Rehabilitative Services), the State Budget Office, and a community children's advocate, the Southeastern New England United Way, assist in funding this effort.

The survey noted policy changes in the areas of sex education, parental involvement, and maternal health and medical care. No description of these changes was provided.

C. LOCAL PROGRAMMING ON TEEN PREGNANCY/PARENTING

These fall into two areas: 1) prevention of teen pregnancy and 2) services whose goals may be educational or health related.

1. Prevention of Teen Pregnancy:

School-based Health Clinics: High schools are beginning to establish health facilities inside the school that handle all of the students' health problems including those involving sexuality. Some programs in the region are the Comprehensive Adolescent Health and Education Program in New York City, the Center for Adolescent Resources, Bridgeport, CT, and School Health Clinic at Weaver High School, Hartford, CT. Resource information on clinics is provided by the Center for Population Options.

Theater and Panel Presentations: Family life education on issues such as peer relationships, teen pregnancy, and drug and alcohol abuse are presented in a dramatic format or through a panel discussion in which adolescents are the speakers and actors. In Boston, the Youth Expression Theater sponsored by Planned Parenthood of Massachusetts tours the Greater Boston area performing in junior and senior high schools.

Publicity Programs: A number of organizations such as the Children's Defense Fund, Urban League, and Planned Parenthood have begun publicity programs using posters, television, and radio. The Mid-Atlantic Center for Sex Equity, at the NETWORK, Inc., has an excellent poster and information sheet on teen pregnancy called "Children Are Forever." Available for $5.00 at 5010 Wisconsin Avenue, Suite 310, Washington, DC 20016.

Curriculum on Decision Making and Sex Education: Center for Population Options has developed a Life Planning Education Curriculum that combines sexuality and career education to help teens in decision making for their futures. Another curriculum on sexuality decision making is We're Not Just Talking Sex . . . , produced by Planned Parenthood of Southeastern Pennsylvania, 1120 Sanson Street, Philadelphia, PA 19107.

2. Service Programs to Pregnant and Parenting Teens:

Parenting Programs, Inside and Outside of Schools: Schools and social service agencies have established parenting programs both in schools and outside. Connecticut has the Young Parents Program, regional centers that tutor and provide other services to adolescents during their pregnancy and for about six months after the birth of the child. The Adolescent Parenting Program at Cambridge (MA) Rindge and Latin High School is an example of an inschool program in which special courses, support services, and child care are available for adolescents who are parents.

Health Services for Pregnant and Parenting Adolescents: Some examples of services in the region are: Rochester (NY) Adolescent Pregnancy Prevention and Supportive Services, Young Parents Program of Rhode Island, ACCESS Program of Worcester (MA). These work through local health agencies to advocate for adolescents so that they have healthy babies, are themselves in good health, and can provide minimum support for themselves and their children.

Careers and Job Training Programs: Single Parent Opportunity Program, sponsored by the Vermont Department of Social Welfare, is providing services and training opportunities. In Maine, a number of vocational schools have established single parent programs that provide services and vocational education training. Teen Parent Family Support Program, Alliance for Young Families, Boston, helps clients with vocational training or employment and health needs.

Programs for Teen Fathers: In Dover, NH, New Directions for Young Men is providing education for adolescents and professionals and is developing a curriculum on decision making for young men. Contact is Box 791, Dover, NH 03820. In Boston as part of the Comprehensive School Age Parenting Program, a course for fathers has been established to provide parenting skills, career education, and better self-image.

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PREGNANT AND PARENTING TEENS:
KEEPING THEM IN SCHOOL

is one in a series of packets designed to assist schools and communities in increasing the chances of success for all students. Each packet introduces a specific aspect of the problem of students who fail to reach their full potential and provides descriptions of programs that have been shown to work in addressing that issue. Contact information is provided for every program listed, and an extensive bibliography points the way to further reading and research.

Other titles in the series include:

Good Beginnings for Young Children: Early Identification of High-Risk Youth and Programs That Promote Success

Home and School as Partners: Helping Parents Help Their Children

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